

PIPER RUDNICK LLP

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TELEPHONE: 202-861-3900 FACSIMILE: 202-223-2085

DOCKET NO.: 9570-001-27

ASSISTANT COMMISSIONER FOR PATENTS WASHINGTON, D.C. 20231

Re:

Serial No.:

09/665,757

Applicant(s): John J. PERELESS et al.

Filing Date:

September 20, 2000

For:

METHOD AND SYSTEM FOR RESUME STORAGE AND

RETRIEVAL

Group Art Unit: 3629

Examiner:

OUELLETTE, J.

SIR:

Attached hereto for filing are the following papers:

Fee Transmittal

Petition to Correct Inventorship Under 37 C.F.R. §1.48(a)

Exhibit 1 - Substitute Declaration of Chris N. McRae and Sean Rodwell-Simon (2 pages, executed)

Exhibit 2 - Declaration by Mr. Rodwell-Simon (executed)

Exhibit 3 - Declaration by Wilburn Chesser, including Exhibit (A) a copy of Certified Mail letter to

Mr. John J. Pereless and Exhibit (B) a copy of Certified Mail Receipt (executed)

Exhibit 4 - A copy of an assignment by John J. Pereless and Christopher N. McCrae to The Works,

USA, Inc. (executed)

Exhibit 5 - A copy of an Assignment from The Works USA, Inc. to OutTask, Inc. (executed)

Exhibit 6 - The written consent of assignee OutTask, Inc. to the deletion of John J. Pereless.

Our check in the amount of \$130.00 is attached covering any required fees. In the event any variance exists between the amount enclosed and the Patent Office charges for filing the above-noted documents, including any fees required under 37 C.F.R. 1.136 for any necessary extension of time to make the filing of the attached documents timely, please charge or credit the difference to Deposit Account No. 50-1442. Further, if these papers are not considered timely filed, then a request is hereby made under 37 C.F.R. 1.136 for the necessary extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

PIPER RUDNICK LLP

Steven B. Kelber Attorney of Record

Registration No.: 30,073

Lisa K. Norton

Registration No: 44,977



TOTAL AMOUNT OF PAYMENT

FEE TRANSMITTAL

\$130.00

 Docket No.
 9570-001-27

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 Inventor(s)
 John J. PERELESS et al.

 Group Art Unit
 3629

 Examiner
 OUELLETTE, J.

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Applicant claims small entity status.											FEE CALCUTATION (continued)						
•	■ Charge any <u>UNDERPAYMENT</u> or credit any <u>OVERPAYMENT</u> in the indicated fees to Deposit Account No. 50-1442.											FEE CALCUTATION (continued) 3. ADDITIONAL FEES Large Entity Small Entity Fee Description					
□ Charge the indicated fees to Deposit Account No. 50-1442.											Large Entity		Small	Entity	Fee Description	OGU)	
2. Check enclosed.											Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Paid	
FEE CALCULATION												130	2051	65	Surcharge-late filing fee or oath		
1. BASIC FILING FEE											1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet		
Large	Entity	Small	Fee Description					1053	130	1053	130	Non-English specification					
Fee Code	Fee (\$)	Fee Code	Fee (\$)							Fee Paid	1812	2520	1812	2520	Ex parte reexam. fee		
1001	750	2001		375	Utility filing fee				1251	110	2251	55	1-mo. ext. of time				
1002	330	2002		165	De	sign filing	gn filing fee				1252	410	2252	205	2-mo. ext. of time		
1003	520	2003	260		Plant filing fee						1253	930	2253	465	3-mo. ext. of time		
1004	750	2004	4 375		Reissue filing fee						1254	1450	2254	725	4-mo. ext. of time		
1005 160 2005				80	30 Pro		Provisional filing fee				1255	1970	2255	985	5-mo. ext. of time		
SUBTOTAL (1) \$0.00								\$0.00	1401	320	2401	160	Notice of Appeal				
2. EXTRA CLAIM FEES									1402	320	2402	160	Appeal Brief				
tot. claims		20	•	20*	=	0	x	\$9	=	0	1403	280	2403	140	Request for Oral Hearing		
ind. c	laims	4	-	4*	=	0	x	\$42	=	0	1501	1300	2501	650	Utility/Reissue Issue Fee		
0	Multip	Multiple Dependent Claims \$140 =				<u> </u>	1502	470	2502	235	Design Issue Fee						
Large	Entity	Smal	l Entit	ty	Fee Description						1503	630	2503	315	Plant Issue Fee		
Fee Code	Fee (\$)	Fee Code	Fee (\$)								1460	130	1460	130	Petitions to the Commissioner	\$130.00	
1202	18	2202)2 9		Claims in excess of 20						1806	180	1806	180	IDS Submission		
1201	84	2201 42		Independent claims in excess of 3						8021	40	8021	40	Assignment			
1203	280	2203	140		Multiple dependent claim, if not paid						1801	750	2801	375	For Filing RCE		
1204	84	2204 42			*Reissue independent claims over original patent						1802	900	1802	900	Expedited Design		
1205	18	2205		9	*Reissue claims in excess of 20 and over original patent						OTHER (indicate below):						
	•					SUB	то	TAL (2)		\$0.00					<u> </u>		
* or nur	* or number previously paid, if greater; For Reissues, see above									SUBTOTAL (3)				\$130.00			

Registration No.

Registration No.

3/21/03

Date

30,073

44,977

Telephone

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Rev.	01/03

Name

Name

Signature

Steven B. Kelber

Lisa K. Norton